

No. 01-90**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Donald C. MorrisName of Deceased Cecelia Lorraine KellerAge 57 years month daysPlace of death 87 Turnpike Rd SouthboroughDate of death January 15, 1990  
15 monthsCause of death Metastatic lung CancerInterment at Rural CemeteryDate permit issued January 17, 1990Certified by John Krikorian M.D.No. 01-90**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to BOARD OF HEALTH  
(Office issuing permit)or Town of SOUTHBORO Mass.of deceased C. LORRAINE KELLER

U. S. War Veteran, specify what war, organization, etc.

**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was  
used of in accordance with its termsSouthborough Rural Cemetery... Southborough, MA  
(Name of cemetery or crematory) (City or town)January 18, 1990ified by [Signature]  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



# The Commonwealth of Massachusetts

DEPARTMENT OF PUBLIC HEALTH  
REGISTRY OF VITAL RECORDS AND STATISTICS

No. 01-90

## OFFICIAL BURIAL (OR REMOVAL) PERMIT

(Issued under the provisions of Chapter 114, Section 45, General Laws, Ter. Ed., as amended.)

(This permit can be signed only by the agent of the Board of Health (or in towns where there is no Board of Health by the town clerk) of the city or town in which the death occurred AFTER the FILING and acceptance of a satisfactory certificate of death, printed or typed in durable black ink.)

Southborough January 17 1990  
(City or town) (Date)

A satisfactory certificate of death having been filed, permission is hereby given to

Donald C Monis 40 Main Street  
(Name) (Address)

for the removal from Southborough, and the interment  
(To be filled out in case of removal)

at Rural Cemetery in Southborough, of the

body of Cecelia Loraine Keller who died January 15 1990  
(Give full name of deceased) (Month) (Day) (Year)

age 57 years, ..... months, ..... days.

Cause of death Metastatic lung cancer (15mo)

If a U. S. War Veteran, specify what war, organization, etc.....

Residence at time of death 87 Turnpike Rd Southborough

Ann A. Torcibeth  
(Signature of Agent of Board of Health, or, in towns where there is no Board of Health, of Town Clerk)

Black ink

No. 01-90

## BURIAL (OR REMOVAL) PERMIT

This coupon to be returned immediately, properly endorsed

to Board of Health  
(Office issuing permit)

City or Town of Southborough Mass.

Name of deceased Cecelia Loraine Keller

If a U. S. War Veteran, specify what war, organization, etc.

## ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at .....  
(Name of cemetery or crematory) (City or town)

on .....

Certified by .....  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 02-90

**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Donald C MorrisName of Deceased Brone H. BezokasAge 74 years 2 months 0 daysPlace of death 75 Worcester Rd SouthboroDate of death March 15, 1990Cause of death Cardio pulmonary arrestInterment at Rural CemeteryDate permit issued March 19, 1990Certified by Dr R W Pattenhouse M.D.

No. 02-90

**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to Agent - Board of Health  
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Brone H. Bezokas

a U. S. War Veteran, specify what war, organization, etc.

g Co 1199th Engr Base Depot WW.II.**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was  
disposed of in accordance with its termsSouthborough Rural Cemetery Southborough  
(Name of cemetery or crematory) (City or town) MAMarch 19, 1990Certified by R. W. Pattenhouse (Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 23.....90.....**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Edward P. SheaName of Deceased Mr. C. J. Murphy Inc.  
Gordon H. JewettAge 74 years.....months.....daysPlace of death 250 Main St SouthboroDate of death April 9 - 1990Cause of death Squamous Cell Carcinoma  
of lungInterment at Rural Cemetery WorcesterDate permit issued April 10, 1990Certified by Edmund G. Chickster.....M.D.No. 3-90.....**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to Agent Board of Health  
(Office issuing permit)Town of Southboro.....Mass.of deceased Gordon H. JewettS. War Veteran, specify what war, organization, etc.  
.....**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was  
interred in accordance with its terms**RURAL CEMETERY, WORCESTER, MASS.**

(Name of cemetery or crematory)

(City or town)

APR 11 1990Signed by Arthur T. Scammon, Jr.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No.

04-90

## BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Jany McCabe Funeral Home

Name of Deceased

Joseph J. Dowling

Age

65

years

months

days

Place of death

Rt. 1-495 in Southborough

Date of death

April 29, 1990

Cause of death

laceration, Aorta Cardiac Arrhythmia  
Motor Vehicle Accident Coronary Heart Disease

Interment at

St. Patrick's Cemetery, Lowell, Mass

Date permit issued

May 3, 1990

Certified by

Timothy P. Stone

M.D.

No.

04-90

## BURIAL (OR REMOVAL) PERMIT

This coupon to be returned immediately, properly endorsed

to

Agent - Board of Health  
(Office issuing permit)

own of

Southborough

Mass.

deceased

Joseph Dowling

S. War Veteran, specify what war, organization, etc.

WW II

## ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was  
of in accordance with its terms

St. Patrick Cemetery, Lowell, MA

(Name of cemetery or crematory)

(City or town)

5-3-90

I by

GEORGE W. MERRITT

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 05-90**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Regina Bonanno-SlatteryName of Deceased Thomas Joseph DandoAge 57 years ..... months ..... daysPlace of death 157 Parkerville Rd SouthboroughDate of death May 6 - 1990Cause of death Metastatic Bladder CancerInterment at Rural Crematory, Worcester, MA  
Burial in Rural C. SouthboroughDate permit issued May 8, 1990  
In Marion H. Dussell - RNCertified by John Kikonian ..... M.D.No. 05-90**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to Agent - Board of Health  
(Office issuing permit)City or Town of Southborough ..... Mass.Name of deceased Thomas Joseph Dando

U. S. War Veteran, specify what war, organization, etc.

Korean Conflict**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was  
disposed of in accordance with its terms**RURAL CEMETERY CREMATORY, WORCESTER, MASS.**

(Name of cemetery or crematory)

(City or town)

**MAY 9 1990**Certified by Arthur T. Scanlon, Jr.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 06-90

## BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to Donald C Morris Funeral HomeName of Deceased Howard TruesdaleAge 72 years 3 months 16 daysPlace of death 14 Middle Rd SouthboroughDate of death May 23, 1990Cause of death Carcinoma lung, right upper lobeInterment at Rural CemeteryDate permit issued May 24, 1990Certified by Diane Warshofsky R.N. M.D.

No. 06-90

## BURIAL (OR REMOVAL) PERMIT

This coupon to be returned immediately, properly endorsed

to Agent Board of Health  
(Office issuing permit)Town of Southborough Mass.of deceased Howard Truesdale

S. War Veteran, specify what war, organization, etc.

World War II

## ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was  
received in accordance with its termsSouthborough Rural Cemetery, Southborough, MA  
(Name of cemetery or crematory) (City or town)

May 26, 1990

Signed by Bridget A. Gillman (Supt.)  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 0790

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to JOHN P. ROWEName of Deceased THOMAS HUGH FERRISAge 85 years ..... months ..... daysPlace of death SOUTHBORO MA  
2 WINTER STREETDate of death 7/5/90Cause of death CHRONIC OBSTRUCTED LUNG DISEASEInterment at RURAL CEMETARYDate permit issued 7/6/90Certified by MARTIN I. VOGEL M.D.  
336 UNION AVE. FARMINGHAM-

0790

No. ....

**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to BOARD OF HEALTH  
(Office issuing permit)Town of SOUTHBOROUGH, MA ..... Mass.of deceased THOMAS HUGH FERRIS, SR.

S. War Veteran, specify what war, organization, etc.

**ENDORSEMENT***(To be filled in by cemetery or crematory official)*I hereby certify that the body accompanying this permit was  
deposited in accordance with its termsRURAL Cemetery Southboro, MA  
(Name of cemetery or crematory) (City or town)July 9th 1990Signed by G. G. Mooney  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 0890**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to DONALD MORRIS FUNERALName of Deceased SEWARD B. LISKAge 70 years ..... months ..... daysPlace of death SOUTHBORO -6 MOULTON ROADDate of death JULY 10, 1990Cause of death PNEUMONIAInterment at RURAL CEMETARYDate permit issued JULY 13, 1990Certified by DR JACK LEITNER M.D.No. 0890**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Board of Health  
(Office issuing permit)r Town of Southboro Mass.of deceased Seward B Lisk

U. S. War Veteran, specify what war, organization, etc.

old War II Army**ENDORSEMENT***(To be filled in by cemetery or crematory official)*ereby certify that the body accompanying this permit was  
sed of in accordance with its termsouthborough Rural Cemetery Southborough  
(Name of cemetery or crematory) (City or town)

July 13, 1990

fied by Budget C. Hillman  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 9-90**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Donald C. Morris Funeral HomeName of Deceased Irvin M. Garfield #Age 44 years — months — daysPlace of death Southborough M. 84 Main St.  
Respiratory ArrestDate of death July 16, 1990Cause of death Respiratory ArrestInterment at Rural Cemetery - SouthboroDate permit issued July 18, 1990Certified by Connie R. Preller M.D.No. 9-90**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to Town Clerk  
(Office issuing permit)or Town of Southboro Mass.e of deceased Irvin M. Garfield #U. S. War Veteran, specify what war, organization, etc.  
—**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was  
used of in accordance with its termsSouthborough Rural Cemetery, Southborough, MA  
(Name of cemetery or crematory) (City or town)July 21, 1990Signed by Robert J. [Signature] (Supt.)  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No.

10-90

## BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to Warren A. RandName of Deceased Warren B. SmithAge 66 years ..... months ..... daysPlace of death Southborough, MaDate of death July 24, 1990Cause of death Cancer of PancreasInterment at Pine Grove Cemetery, Westboro, MaDate permit issued July 26, 1990Certified by Donald E. Love M.D.

09

No.

10-90

## BURIAL (OR REMOVAL) PERMIT

This coupon to be returned immediately, properly endorsed

to

(Office issuing permit)

or Town of

e of deceased

U. S. War Veteran, specify what war, organization, etc.

WW2

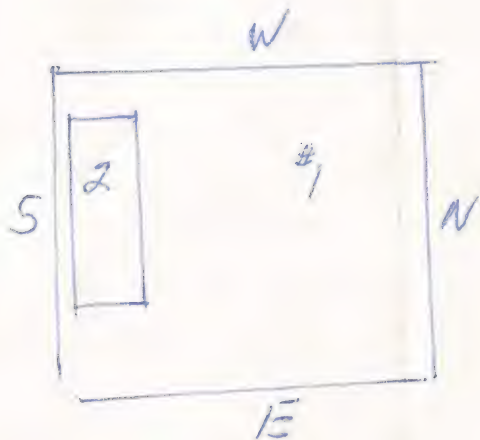
## ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was  
used of in accordance with its termsPine Grove Cemetery, Westboro, Mass  
(Name of cemetery or crematory) (City or town)July 27, 1990  
Philip C. Ayres  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

Sec. 16  
Lot. 308  
July 27, 1990  
Harren B. Smith





No. 11-90**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Donald C. Morris Funeral HomeName of Deceased Edward OrzechAge 70 years months daysPlace of death Southboro, MaDate of death August 23, 1990Cause of death Asphyxiation By HangingInterment at Rural Cemetery SouthboroDate permit issued August 27, 1990Certified by R.W. Rittenhouse M.D.No. 11-90**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to Board of Health  
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Edward Orzech

If a U. S. War Veteran, specify what war, organization, etc.

World War II Army Air Corp**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA  
(Name of cemetery or crematory) (City or town)on August 27, 1990Certified by Bridget C. Gallahan (Supt.)  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 12-90

## BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to DONALD C. MORRIS FUNERAL HOME

Name of Deceased GEORGE F. SULLIVAN

Age 81 years months days

Place of death SOUTH BOROUGH

Date of death SEPTEMBER 20, 1990

Cause of death METASTATIC CANCER OF THE PANCREAS

Interment at RURAL CEMETERY, WORCESTER, MA

Date permit issued September 21, 1990

Certified by JOHN N. KRICKORIAN M.D.

No. 12-90

## BURIAL (OR REMOVAL) PERMIT

This coupon to be returned immediately, properly endorsed

to TOWN CLERK  
(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased George F. Sullivan

If a U. S. War Veteran, specify what war, organization, etc.

## ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at RURAL CEMETERY CREMATORY, WORCESTER, MASS.  
(Name of cemetery or crematory) (City or town)

on SEP 24 1990

Certified by Arthur T. Skanlon  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 13-90**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to DONALD C MORRISName of Deceased CARL A BALLETTAge 90 years ..... months ..... daysPlace of death Southboro, MA.Date of death October 17, 1990Cause of death COLON METASTATIC CARCINOMA OFInterment at Rural Crematory - Worcester, MA.Date permit issued Oct. 19, 1990Certified by Robert C Sumner M.D.No. 13-90**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to Board of Health  
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Carl A BalliettIf a U. S. War Veteran, specify what war, organization, etc.  
.....**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at RURAL CEMETERY CREMATORY, WORCESTER, MASS.

(Name of cemetery or crematory) (City or town)

on OCT 22 1990Certified by Arthur T. Seelman  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No.

14-90

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to ..... PETER WAOSWORTH

Name of Deceased ..... WILFRED J. TURENNE

Age ..... 92 ..... years ..... months ..... days

Place of death ..... SOUTH BOROUGH, MA

Date of death ..... NOV. 17, 1990

Cause of death ..... CEREBRO VASCULAR ACCIDENT

Interment at ..... NEWTON CREMATORY

Date permit issued ..... NOVEMBER 20, 1990

Certified by ..... ROBERT M. JARGI, M.D. .... M.D.

No.

14-90

**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to ..... Bd of Health  
(Office issuing permit)

City or Town of ..... Southborough 072 ..... Mass.

Name of deceased ..... Wilfred J. Turenne

If a U. S. War Veteran, specify what war, organization, etc.

**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at ..... Newton Crematory, Newton, MA .....  
(Name of cemetery or crematory) (City or town)

on ..... November 20, 1990

Certified by ..... [Signature] .....  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 01-91

## BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to EUGENE J. MC CARTHY & SONS

Name of Deceased RICHARD VICTOR ZANELLA

Age 59 years months days

Place of death 10 Walnut Drive  
SOUTHBOROUGH, MA

Date of death JANUARY 12, 1991

Cause of death CORONARY HEART DISEASE

Interment at RURAL CEMETERY, SOUTHBOROUGH

Date permit issued JANUARY 15, 1991

Certified by T. MARY P. STONE M.D.

No. 01-91

## BURIAL (OR REMOVAL) PERMIT

This coupon to be returned immediately, properly endorsed

to TOWN CLERK'S OFFICE  
(Office issuing permit)

City or Town of SOUTHBOROUGH Mass.

Name of deceased RICHARD VICTOR ZANELLA

If a U. S. War Veteran, specify what war, organization, etc.  
Korea

## ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA  
(Name of cemetery or crematory) (City or town)

on January 16, 1991

Certified by [Signature] (Supt.)  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 02-91

**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit.

Issued to Donald S. Morris Funeral Home

Name of Deceased LUCIANO VANNI

Age 82 years months days

Place of death 197 Parkerville Rd.  
Southborough, MA

Date of death January 18, 1991

Cause of death GASTRIC Carcinoma

Interment at Rural Cemetery, Southborough

Date permit issued January 21, 1991

Certified by Doreen Britten M.D.

No. 02-91

**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to Board of Health/Town Clerk  
(Office issuing permit)

City or Town of Southborough Mass.

Name of deceased LUCIANO VANNI

If a U. S. War Veteran, specify what war, organization, etc.

**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA  
(Name of cemetery or crematory) (City or town)

on January 21, 1991

Certified by [Signature] (Supt.)  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 03-91

**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Donald C. Matus Funeral HomeName of Deceased BEATRICE A. BROCKAge 65 years ..... months ..... daysPlace of death Southborough, Ma  
9 Latisquama Rd.Date of death January 19, 1991Cause of death Renal failureInterment at Rural Cemetery SouthboroughDate permit issued January 22, 1991Certified by Nancy Jane C. Friedley M.D.

No. 03-91

**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to Town CLERK  
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Beatrice A. Brock

If a U. S. War Veteran, specify what war, organization, etc.

**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA.  
(Name of cemetery or crematory) (City or town)on January 22, 1991Certified by [Signature] (Supt.)  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 04-91.....**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Donald C. Morris Funeral Home.....Name of Deceased LORRAINE June Kendall.....Age 65 years..... months..... days.....Place of death 230 Parkerville Rd.  
Southborough, ma.....Date of death February 12, 1991.....Cause of death Metastatic Adenocarcinoma  
of Lung.....Interment at Rural Cemetery, Southboro.....Date permit issued February 13, 1991.....Certified by Paul J. Wright M.D......M.D.No. 04-91.....**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to Town Clerk  
(Office issuing permit)City or Town of Southborough..... Mass.Name of deceased Lorraine June Kendall.....If a U. S. War Veteran, specify what war, organization, etc.  
- 0 -**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was  
disposed of in accordance with its termsat Rural Cemetery..... Southborough, MA.....  
(Name of cemetery or crematory) (City or town)on February 15, 1991.....Certified by Finch, Hilary (Supt.)  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 05-91**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Alan P. Slattery Funeral HomeName of Deceased George PersonisAge 68 years 128 months 128 daysPlace of death 128 Davenport Road, Southborough, MADate of death February 19, 1991Cause of death Metastatic CarcinomatosisInterment at Rural Cemetery - SouthboroughDate permit issued February 22, 1991Certified by Donald E. Lowe M.D.No. 05-91**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to Town Clerk  
(Office issuing permit)City or Town of Southborough Mass.Name of deceased George Personis

If a U. S. War Veteran, specify what war, organization, etc.

WW II**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA  
(Name of cemetery or crematory) (City or town)on February 25, 1991Certified by Donald E. Lowe (Supt.)  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 06-91**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Donald C. Morris Funeral HomeName of Deceased Stacey Lee Buck Jr.Age 35 years 36 months 36 daysPlace of death 36 Clifford Road  
Southborough, MA.Date of death May 18, 1991Cause of death Asphyxia by hangingInterment at Rural Cemetery - SouthboroDate permit issued May 20, 1991Certified by Dr. Timothy P. Stone M.D.No. 06-91**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to Town Clerk  
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Stacey Lee Buck Jr.If a U. S. War Veteran, specify what war, organization, etc.  
—**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA  
(Name of cemetery or crematory) (City or town)on May 22, 1991Certified by Bridget H. Hillman (Supt.)  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 7-91**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Donald C. Morris Funeral HomeName of Deceased Denise BissellAge 38 years  months  days  
Red Roof Inn Room 112 Rt 9, 376 TurnpikePlace of death Southboro, Ma. RoadDate of death July 5, 1991Cause of death PENDINGInterment at Worcester, Ma Rural CrematoryDate permit issued July 8, 1991Certified by F. J. KROKOWSKI MDNo. 7-91**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to Town Clerk  
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Denise BissellIf a U. S. War Veteran, specify what war, organization, etc.  
- - -**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at RURAL CEMETERY CREMATORY, WORCESTER, MASS  
(Name of cemetery or crematory) (City or town)on JUL 9 1991Certified by Arthur T. Scanlon  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 8-91

## BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to Donald C. Morris Funeral Home

Name of Deceased John J. FARRICY

Age 80 years months days  
212 Southville Road

Place of death Southborough

Date of death July 5, 1991

Cause of death CORONARY ARTERY DISEASE

Interment at RURAL CEMETERY, Southborough

Date permit issued JULY 9, 1991

Certified by F. J. KROCKOWSKI M.D.

No. 8-91

## BURIAL (OR REMOVAL) PERMIT

This coupon to be returned immediately, properly endorsed

to TOWN CLERK  
(Office issuing permit)

City or Town of Southborough Mass.

Name of deceased John J. FARRICY

If a U. S. War Veteran, specify what war, organization, etc.

## ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA  
(Name of cemetery or crematory) (City or town)

on July 10, 1991

Certified by [Signature] (Supt.)  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

9-91  
No. ....**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Kevin L. MercadanteName of Deceased RICKY LYNN LANEYAge 34 years ..... months ..... daysPlace of death Southboro, MA, 109 MILE MARKER  
MASS PIKE -Date of death AUGUST 12, 1991Cause of death PENDINGInterment at MAUMEE Cemetery, Antwerp, OHDate permit issued August 15, 1991Certified by F. J. KROLIKOWSKI M.D.



No. 10-91**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Donald C. Morris Funeral HomeName of Deceased Francis E. RamelleAge 85 years ..... months ..... daysPlace of death 36 Main Street  
SouthboroDate of death September 17, 1991Cause of death Metastatic Cancer in the  
Liver of unknown primary siteInterment at Rural Cemetery SouthboroughDate permit issued September 19, 1991Certified by John Krikorian M.D.No. 10-91**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to Town Clerk  
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Francis E. Ramelle

If a U. S. War Veteran, specify what war, organization, etc.

**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA  
(Name of cemetery or crematory) (City or town)on September 21, 1991Certified by Bridget R. Gilleney (Supt.)  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 11-91**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Wadsworth Funeral HomeName of Deceased Everett A. EricksonAge 81 years ..... months ..... daysPlace of death 18 Oak Hill Rd.  
Southborough, MaDate of death December 16, 1991Cause of death ArrhythmiaInterment at Edgell Grove Cemetery, Framingham, MaDate permit issued December 18, 1991Certified by Chong Peter Le, M.D. M.D.No. 11-91**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to Town Clerk  
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Everett A. Erickson

(If a U. S. War Veteran, specify what war, organization, etc.)

**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was  
disposed of in accordance with its terms (ENTOMBMENT)at EDGEELL GROVE CEMETERY, FRAMINGHAM  
(Name of cemetery or crematory) (City or town)on DECEMBER 19, 1991Certified by Kevin T. Devlin (Sec.)  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 1-92**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

Donald C. Marros

Name of Deceased

Robert A. Holbrook

Age

72

years

months

days

Place of death

TOWN OF SOUTHBOROUGH

Date of death

January 25, 1992

Cause of death

Carcinoma of Prostate

Interment at

Rural Cemetery - Southboro

Date permit issued

January 28, 1992

Certified by

Timothy S. Wisch, M.D.No. 1-92**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to

Town Clerk

(Office issuing permit)

City or Town of

TOWN OF SOUTHBOROUGH Mass.

Name of deceased

Robert A. Holbrook

If a U. S. War Veteran, specify what war, organization, etc.

World War II**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at

Rural CemeterySouthborough, MA

(Name of cemetery or crematory)

(City or town)

on

January 29, 1992

Certified by

Budget C. Gilleney  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 2-92**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Donald C. Morris FuneralName of Deceased Gertrude M. PhaneufAge 81 years months daysPlace of death TOWN OF SOUTHBOROUGHDate of death April 21, 1992Cause of death Aspiration PneumoniaInterment at Rural Cemetery - SouthboroDate permit issued April 24, 1992Certified by Robert E. Johnson M.D.No. 2-92**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to Town Clerk  
(Office issuing permit)City or Town of TOWN OF SOUTHBOROUGH Mass.Name of deceased Gertrude M. PhaneufIf a U. S. War Veteran, specify what war, organization, etc.  
\_\_\_\_\_**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro, MA.  
(Name of cemetery or crematory) (City or town)on April 25, 1992Certified by H. G. Moorhead  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 3-92**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to DONALD C. MORRIS FUNERAL  
HomeName of Deceased HOPE GILBERT CUMMINGSAge 63 years ..... months ..... daysPlace of death TOWN OF SOUTHBOROUGHDate of death JUNE 24, 1992Cause of death METASTATIC CANCER OF THE OVARYInterment at FORBES CEMETERYDate permit issued JUN 25, 1992Certified by JOHN KRIGORIAN M.D.No. 3-92**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to Town Clerk  
(Office issuing permit)City or Town of TOWN OF SOUTHBOROUGH Mass.Name of deceased HOPE GILBERT CUMMINGS

Is a U. S. War Veteran, specify what war, organization, etc.

no**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was  
disposed of in accordance with its termsFarber Cemetery W. Paris  
(Name of cemetery or crematory) (City or town)JUNE 30, 1992Certified by Bruce Bean  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

## BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to *Crawell King Co.*  
*474 Stone Hill Ave. S.W.*Name of Deceased *MAE KARRAM.*Age *84* years..... months..... daysPlace of death *TOWN OF SOUTHBOROUGH*Date of death *June 29, 1992*Cause of death *INFILTRATION Disease of*  
*Liver & Liver Failure*Interment at *St. Olivet Cemetery*  
*Maspeth Queens, New York*Date permit issued *June 29, 1992*Certified by *Robert Sumner*.....M.D.



No.

5-92

## BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Frances J. Joyce

Name of Deceased

Constance M. Pangburn

Age

60

years

months

days

Place of death

RAPID City, South Dakota  
TOWN OF SOUTHBOROUGH

Date of death

July 4, 1992

Cause of death

Pulmonary Embolism

Interment at

Rural Cemetery, Southboro  
To Grave #

Date permit issued

August 25, 1992

Certified by

M.D.

309

No.

5-92

## BURIAL (OR REMOVAL) PERMIT

This coupon to be returned immediately, properly endorsed

to

TOWN CLERK

(Office issuing permit)

y or Town of

TOWN OF SOUTHBOROUGH

Mass.

me of deceased

Constance M. Pangburn

a U. S. War Veteran, specify what war, organization, etc.

## ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was  
sposed of in accordance with its terms

Rural Cemetery

(Name of cemetery or crematory)

Southborough, MA

(City or town)

August 27, 1992

ertified by

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No.

6-92

**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

Francis J. Joyce

Name of Deceased

Constance M. Pangburn

Age

60

years

months

days

Place of death

Rapid City South Dakota  
~~TOWN OF SOUTHBOROUGH~~

Date of death

July 4, 1992

Cause of death

Pulmonary Embolism

Interment at

Rural Cemetery Southboro

Date permit issued

August 25, 1992

Certified by

M.D.

No.

6-92

**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to

TOWN CLERK

(Office issuing permit)

City or Town of

TOWN OF SOUTHBOROUGH

Mass.

Name of deceased

Constance M. Pangburn

If a U. S. War Veteran, specify what war, organization, etc.

**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at

Rural Cemetery

Southborough, MA

(Name of cemetery or crematory)

(City or town)

on

August 27, 1992

Certified by

Budget C. Gilman  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 7-92**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to John P. Rowe Funeral HomeName of Deceased Clarence John Montgomery <sup>HOFER</sup>Age 58 years ..... months ..... daysPlace of death TOWN OF SOUTHBOROUGHDate of death October 9, 1992Cause of death Metastatic <sup>Cancer</sup> COLONInterment at Rural Crematory - Worcester <sup>ma</sup>Date permit issued Oct. 9, 1992Certified by John Krikorian M.D.No. 7-92**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to TOWN CLERK  
(Office issuing permit)City or Town of TOWN OF SOUTHBOROUGH Mass.Name of deceased Clarence John Montgomery <sup>HOFER</sup>

If a U. S. War Veteran, specify what war, organization, etc.

**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at RURAL CEMETERY CREMATORY, WORCESTER, MASS.  
(Name of cemetery or crematory) (City or town)on OCT 13 1992Certified by Arthur T. Hauloway  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 8-92**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to CHESMORE FUNERALSName of Deceased MARGENE JOHNSONAge 50 years — months — daysPlace of death TOWN OF SOUTHBOROUGHDate of death December 30, 1992Cause of death Metastatic Breast CancerInterment at Southborough, Rural CemeteryDate permit issued Dec. 31, 1992Certified by Frank R Coco M.D.No. 8-92**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to TOWN CLERK  
(Office issuing permit)TOWN OF SOUTHBOROUGH Mass.Name of deceased MARGENE JOHNSON

If a U. S. War Veteran, specify what war, organization, etc.

NO**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA  
(Name of cemetery or crematory) (City or town)on January 2, 1993Certified by [Signature]  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

435-6444



From the Desk of

CONNIE C. MAIDA

12-31-92

10:50 A.M.

Paul,

Bob Cheemall from Cheemall  
Funeral Home in Hopkinton  
called.

He needs a Burial Permit  
over the weekend for

Johnson

2 Banfill Lane

D.O.D. 12-20-92

It is not signed yet by  
~~the Medical Examiner, etc etc~~

He was told by Morris  
Funeral Home "Good luck  
when you call them." He  
went on & on about how  
he will handle it.

I told him it was unfair  
to this office for that remark  
by Morris' Funeral Home.  
We would make some  
arrangements which have been

From the Desk of



CONNIE C. MAIDA

done in the past and will be done in the future. I conveyed to him, that we do know our responsibilities. He was apologetic.

I tried calling your home, I could not make a connection. Your answering machine is not activated.

---

Happy New Year!

Connie



No.

01-93

**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

Morris Funeral Home

Name of Deceased

Helen R. Bertozzi

Age

74

years

months

days

Place of death

TOWN OF SOUTHBOROUGH

Date of death

Feb. 11, 1993

Cause of death

Cardiorespiratory Arrest

Interment at

Rural Cemetery Southboro

Date permit issued

Feb. 15, 1993

Certified by

Roberto Mauri

M.D.

No.

01-93

**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to

TOWN CLERK

(Office issuing permit)

TOWN OF SOUTHBOROUGH

Mass.

Name of deceased

Helen R. Bertozzi

If a U. S. War Veteran, specify what war, organization, etc.

**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at

Rural Cemetery

Southborough, MA

(Name of cemetery or crematory)

(City or town)

on

February 15, 1993

Certified by

Budget L. Hillery

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 0-2-93**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Morris Funeral HomeName of Deceased Joseph MauroAge 92 years..... months..... daysPlace of death TOWN OF SOUTHBOROUGHDate of death Feb. 17, 1993Cause of death Coronary Artery DiseaseInterment at Rural Cemetery - SouthboroDate permit issued Feb 18, 1993Certified by Shun-Haw Lee M.D.No. 02-93**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to TOWN CLERK  
(Office issuing permit)TOWN OF SOUTHBOROUGH  
City or Town of ..... Mass.Name of deceased Joseph MauroIf a U. S. War Veteran, specify what war, organization, etc.  
—**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was  
disposed of in accordance with its termsat Rural Cemetery Southborough, MA  
(Name of cemetery or crematory) (City or town)on February 20, 1993Certified by Bridget L. Gifford  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No.

03/93

**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

Morris Funeral Home

Name of Deceased

John R. Mulhall

Age

72

years

months

days

Place of death

TOWN OF SOUTHBOROUGH

Date of death

February 17, 1993  
Ventricular Fibrillation

Cause of death

Ventricular Fibrillation

Interment at

Wildwood Cemetery,  
Ashland, MA

Date permit issued

February 18, 1993

Certified by

L. Frederick Kaplan, M.D.

No.

03/93

**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to

TOWN CLERK

(Office issuing permit)

TOWN OF SOUTHBOROUGH

City or Town of

Mass.

Name of deceased

John R. Mulhall

If a U. S. War Veteran, specify what war, organization, etc.

WW II

**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at

WILDWOOD CEMETERY, ASHLAND

(Name of cemetery or crematory)

(City or town)

on

FEBRUARY 22, 1993

Certified by

Paul A. Reso, Supt.

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 04-93**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Morris Funeral Home

Name of Deceased Catherine E. Skilton

Age 86 years ..... months ..... days

Place of death TOWN OF SOUTHBOROUGHDate of death April 5, 1993  
Cardiac ArrhythmiaCause of death Cardiac ArrhythmiaInterment at Rural Cemetery - SouthboroDate permit issued April 6, 1993Certified by Dr. Timothy P. Stone  
Stephen D. Morris M.D.No. 04-93**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to TOWN CLERK  
(Office issuing permit)

TOWN OF SOUTHBOROUGH  
City or Town of ..... Mass.

Name of deceased Catherine E. Skilton

If a U. S. War Veteran, specify what war, organization, etc.

**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA  
(Name of cemetery or crematory) (City or town)

on April 9, 1993

Certified by David J. Gillman  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 05-93**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Caton Funeral HomeName of Deceased Laurence J. PreussAge 76 years ..... months ..... daysPlace of death TOWN OF SOUTHBOROUGHDate of death April 11, 1993Cause of death Carcinoma  
Recurrent BronchogenicInterment at Evergreen Cemetery, MarlboroDate permit issued April 13, 1993Certified by Robert V. LIBERTINI M.D.No. 05-93**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to TOWN CLERK  
(Office issuing permit)City of TOWN OF SOUTHBOROUGH Mass.Name of deceased Laurence J. Preuss

If a U. S. War Veteran, specify what war, organization, etc.

WW2**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Evergreen Marlboro MA  
(Name of cemetery or crematory) (City or town)on April 14, 1993Certified by Richard J. Bamba  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No.

06-93

**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to William R. Short Funeral HomeName of Deceased Doris C. ChaseAge 87 years..... months..... daysPlace of death TOWN OF SOUTHBOROUGHDate of death April 21, 1993Cause of death Ruptured Aortic AneurysmInterment at Evergreen Cemetery - MarlboroDate permit issued April 22, 1993Certified by G. J. Hill.....M.D.

No.

06-93

**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to Town CLERK  
(Office issuing permit)City or Town of TOWN OF SOUTHBOROUGH..... Mass.Name of deceased Doris C. Chase

If a U. S. War Veteran, specify what war, organization, etc.

**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Evergreen Cemetery - Marlboro MA  
(Name of cemetery or crematory) (City or town)on APRIL 22, 1993Certified by Richard J. Bank  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 07-93**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Morris Funeral HomeName of Deceased Walter R. CurtinAge 73 years ..... months ..... daysPlace of death TOWN OF SOUTHBOROUGHDate of death April 28, 1993Cause of death Heart FailureInterment at Rural Cemetery SouthboroDate permit issued April 30, 1993Certified by Bruce Mirbach M.D.No. 07-93**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to TOWN CLERK  
(Office issuing permit)City or Town of TOWN OF SOUTHBOROUGH Mass.Name of deceased Walter R. Curtin

If a U. S. War Veteran, specify what war, organization, etc.

WW II**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery ..... Southborough, MA .....  
(Name of cemetery or crematory) (City or town)on May 1, 1993Certified by Bruce H. Gillingham  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

08-93  
No. ....**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Morris Funeral HomeName of Deceased Gordon C. JohnsonAge 87 years ..... months ..... daysPlace of death TOWN OF SOUTHBOROUGHDate of death June 14, 1993  
Congestive Heart FailureCause of death Congestive Heart FailureInterment at Rural Cemetery SouthboroDate permit issued June 16, 1993Certified by Peter J. Lucas M.D.08-93  
No. ....**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to Town Clerk  
(Office issuing permit)City or Town of TOWN OF SOUTHBOROUGH Mass.Name of deceased Gordon C. JohnsonIf a U. S. War Veteran, specify what war, organization, etc.  
—**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA  
(Name of cemetery or crematory) (City or town)on June 17, 1993Certified by Dudley J. Hilleney  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 09-93

**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to ..... Anetel Rochette &amp; Son

Name of Deceased ..... Douglas Richard Salvail

Age ..... 3 ..... months ..... days

Place of death TOWN OF SOUTHBOROUGH

Date of death ..... July 2, 1993

Cause of death ..... pending histology  
St Francis Cemetery

Interment at ..... Nashua, N. H.

Date permit issued ..... July 7, 1993

Certified by ..... George Kury, ..... M.D.



No. D-93**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Morris Funeral HomeName of Deceased Ursula MAUROAge 85 years ..... months ..... daysPlace of death 37 Boston Rd. Southborough, MaDate of death Sept. 11, 1993Cause of death Bladder CancerInterment at Rural Cemetery - Southborough at Rural Cemetery ..... Southborough, MA  
(Name of cemetery or crematory) (City or town)Date permit issued Sept. 13, 1993 on September 14, 1993Certified by Robert C. Sumner ..... M.D.

R-309

No. 10-93**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to Town Clerk  
(Office issuing permit)City or Town of Southborough ..... Mass.Name of deceased Ursula MauroIf a U. S. War Veteran, specify what war, organization, etc.  
.....**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery ..... Southborough, MA  
(Name of cemetery or crematory) (City or town)on September 14, 1993Certified by Robert C. Sumner  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No.

11-93

## BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to D. F. O'Brien Funeral HomeName of Deceased Mary B. GetrostAge 73 years..... months..... daysPlace of death SouthboroughDate of death September 12, 1993Cause of death Respiratory ArrestInterment at Mt. Pleasant Cemetery <sup>Arlington MA</sup>Date permit issued September 13, 1993Certified by B. Montgomery M.D.

R-309

No.

11-93

## BURIAL (OR REMOVAL) PERMIT

This coupon to be returned immediately, properly endorsed

to Town Clerk  
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Mary B. Getrost

If a U. S. War Veteran, specify what war, organization, etc.

## ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Mt. Pleasant Cemetery - Arlington  
(Name of cemetery or crematory) (City or town)on September 15, 1993Certified by William M. Cull  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 12-93**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Sweeney Brothers Home for FuneralName of Deceased Vaclav W. ValekAge 43 years ..... months ..... daysPlace of death Southborough, MADate of death November 30, 1993  
due toCause of death Multiple injuries Blunt TraumaInterment at Pine Hill Cemetery, Quincy, MADate permit issued December 1, 1993Certified by Antonio E. Boschetti M.D.No. 12-93**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to So Town Clerk  
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Vaclav W. ValekIf a U. S. War Veteran, specify what war, organization, etc.  
—**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at PINE HILL CEMETERY Quincy  
(Name of cemetery or crematory) (City or town)on DEC 2 1993Certified by Richard P. Maloney  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 13-93**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Morris Funeral HomeName of Deceased Joseph Frank MazzadroAge 81 years ..... months ..... daysPlace of death SouthboroDate of death Dec. 3, 1993Cause of death Carcinoma of LungInterment at Rural Cem. - SouthboroDate permit issued Dec. 6, 1993Certified by David Linton M.D.No. 13-93**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to Paul J. Berry  
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Joseph Frank Mazzadro

If a U. S. War Veteran, specify what war, organization, etc.

World War II**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA  
(Name of cemetery or crematory) (City or town)on December 7, 1993Certified by Burial 1  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 14-93**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Morris Funeral HomeName of Deceased George H. ReillyAge 71 years ..... months ..... daysPlace of death 12 Turnpike Rd  
Southborough, Ma.Date of death 12-15-93Cause of death Metastatic Lung CancerInterment at Rural Cemetery SouthboroDate permit issued 12-16-93Certified by John Krikorian M.D.No. 14-93**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to Paul J. Bong, Town Clerk  
(Office issuing permit)City or Town of TOWN OF SOUTHBOROUGH Mass.Name of deceased George H. Reilly

If a U. S. War Veteran, specify what war, organization, etc.

WW-II**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA  
(Name of cemetery or crematory) (City or town)on December 18, 1993Certified by Budget E. Gillen  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.